### Week Ending: March 18, 2017

## **Disease Surveillance & Risk Report**

No Report No Activity Sporadic Local Regional Widespread Severe

**DEFINTION** of Influenza-like or Flu-Like Illness: (ILI):

1) Fever > 100°F measured with a thermometer AND (2) Cough AND/OR sore throat in the absence of a known cause other than influenza

### **Madison County Flu Activity**

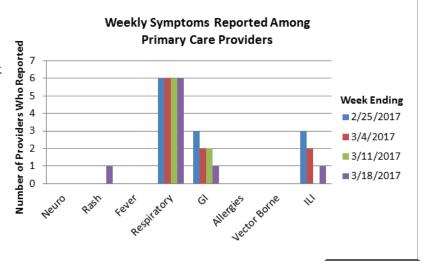
# Flu Activity for the week 11, ending 3/18/17: Widespread

- Lab-confirmed flu: 21 laboratory confirmed flu (9 flu Type A and 12 flu Type B) were reported. The season total to date of reported flu cases is: 334.
- <u>Schools Districts\*</u>: 0.9% of children seen by school nurses appeared with symptoms of influenza-like illness.
- College Health Centers\*: ILI and flu reported
- Primary Care Providers\*: ILI and flu reported
- New York State Hospital Report (HERDS): One flurelated hospitalization reported by hospitals in Madison County for week 11. A total of 27 flu-related hospitalizations have been reported this season to date in Madison County.

### **Madison County Disease Surveillance Updates**

#### Reports for the week ending 3/18/17:

- <u>Communicable Diseases Reported to the Health Department</u>: 1 Chlamydia, 2 gonorrhea, and 1 salmonella
- <u>Primary Care Providers Reported\*:</u> Respiratory infections, gastrointestinal illness (GI), upper respiratory infections (URI), strep throat and scarlatina with rashes, rashes, coughs, pneumonia, colds, respiratory syncytial virus (RSV), and sinus infections (sinusitis)
- College Health Centers\*: Flu, ILI, respiratory illness, chicken pox, strep, UIP, mono, and pneumonia
- Schools Districts\*: Strep, Flu, URI, and GI were reported
- Hospital Weekly Surveillance\*: Flu, ILI, respiratory illness, GI, URI, fever, and strep
- Syndromic Surveillance in Emergency Departments 3/10/17 to 3/19/17: No reports
- Medicaid Over-the-Counter
   (OTC) & Script Medication
   Alerts—2/23/17 to 3/4/17: Mild
   to moderate sensitivity for 1st
   and 2nd Generation
   Cephalosporins, Penicillinase Resistant antibiotics, and
   Tetracyclines (antibiotics)



<sup>\*</sup>Information denoted with an asterisk is subjective and provided on a voluntary basis.

<sup>\*\*</sup>Neurologic can include non-specific diagnosis of neurological infection (e.g. Meningitis, Encephalitis, etc.) or non-specific conditions (e.g. headache, numbness, dizziness, blurry/double vision, speech difficulty, confusion, disorientation, or anxiety)



# **Disease Surveillance & Risk Report**

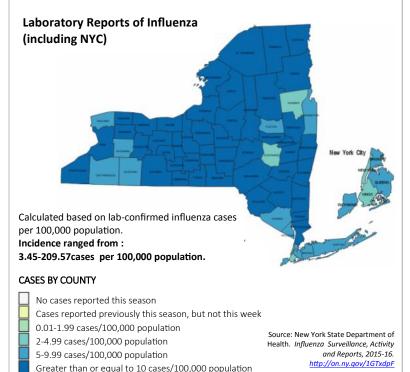
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### **New York State Flu Activity**

#### Flu Activity for the week ending 3/11/17 (week 10): Widespread

- <u>Lab-Confirmed Flu:</u> 2,295, a 27% *decrease* over last week. Flu was reported in 62 counties.
- <u>Flu-Related Hospitalizations:</u> 384 reports, a 34% decrease over last week.
- A select group of providers across the state (outside of NYC)
  reported the percentage of office visits due to complaints of flu-like
  illness (ILI) was 1.72%; this is a decrease from last week, and is
  below the regional baseline of 3.0%.
- <u>Flu-Associated Pediatric Deaths:</u> No reports this week. There have been seven flu-associated deaths this season to date.



### **United States Flu Activity**

### Flu Activity for the week ending 3/11/17 (week 10): Widespread

Flu activity decreased but *remained elevated*. Geographic Flu Activity Summary (Fig. 1):

- Widespread influenza activity was reported by 36 states
- Regional influenza activity was reported by Guam, Puerto Rico and 11 states
- Local influenza activity was reported by the District of Columbia and three states
- No influenza activity was reported by the U.S. Virgin Islands

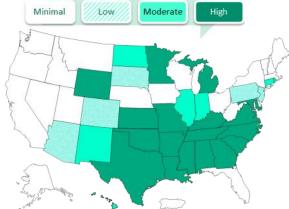
#### **Surveillance Summary:**

- 18 states experienced high ILI activity; Seven states experienced moderate ILI activity; Five states experienced low ILI activity; New York City, Puerto Rico, and 20 states experienced minimal ILI activity (Fig 2).
- Based on pneumonia and influenza (P&I) mortality data, 8% of deaths during week 8 were due to P&I; this is above the epidemic threshold of 7.5% for week 8.
- A cumulative rate for the season of 46.9 lab-confirmed flu-associated hospitalizations per 100,000 population was reported.
- Outpatient illness visits reported through the U.S. ILI Network was 3.7%, this above the national baseline of 2.2%. Seven of 10 U.S. regions reported ILI at or above their region-specific baselines.
- Five flu-associated pediatric deaths were reported. To date, 53 deaths have been reported for the 2016-17 flu season.

**Figure 1:** Geographic Spread of Influenza as
Assessed by State and Territorial Epidemiologists
(This figure does not measure the severity of influenza activity.)



Figure. 2: ILI Activity from ILINet Data



ILI Net Data based on percent of outpatient visits in states due to ILI, more on Fig. 2 at: <a href="http://l.usa.gov/1d3PGtv">http://l.usa.gov/1d3PGtv</a>

Sources: FluView: Weekly U.S. Influenza and Surveillance Report. Centers for Disease Control and Prevention. http://l.usa.gov/leDDFhh

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